Frequently Asked Questions

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Grant Activities

What is the Aging and Disability Vaccine Collaborative (ADVC) grant number? The ADVC grant number is 90ADCI0007. The grant number does not affect subgrantee agreements, documents, or invoicing.

What is the Catalog of Federal Domestic Assistance (CFDA) number for this grant? The CFDA Number and Name for this grant are: 93.048 Special Programs for the Aging, Title IV, and Title II, Discretionary Projects.

When should all grant activities be concluded? Grantees should have all grant activities concluded and funding spent by April 15, 2024.

Will a no-cost extension be available? At this time, ADVC grant funding and activities must be concluded by April 15, 2024.

What are the approved activities under the ADVC grant? Approved activities under the ADVC include clinic/event-based or in-home COVID-19 and Influenza vaccinations and supportive services, outreach, and education to enhance vaccine uptake.

Are organizations allowed to vaccinate individuals who are not older adults or people with disabilities? The outreach for this initiative should be focused on older adults and people with disabilities; however, the grant does allow for other populations to be vaccinated. Individuals are not required to identify as being an older adult or person with a disability to receive ADVC vaccines. All age ranges and population targets should be documented and reported in the grant reporting system, Cumulus. Vaccination surveys include all age ranges (including under age 18).

Who is considered an older adult or an individual with a disability? The ADVC follows Older Americans Act definitions, as the statutory authority for this grant falls under 42 U.S.C. § 3001 et seq. Individuals are invited to self-identify their age and other demographic questions on the individual vaccine survey if they receive a vaccine. Generally, the term “older adult” means an individual who is 60 years of age or older; and the term “disability” means a disability attributable to mental or physical impairment, or a combination of mental and physical

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impairments, that results in substantial functional limitations in one or more areas of major life activity. Individuals may self-identify as having a disability including a disability that may not be visually identifiable to others.

**Can grantees provide other vaccines besides COVID-19 and Influenza vaccines?** This grant is focused on COVID and flu vaccines, and only COVID and flu vaccines are counted toward grant targets. Additionally, all grant-funded clinics should be focused on COVID and/or flu vaccinations (for instance, a grantee should not conduct a “Shingles Vaccine Event”). However, grantees are allowed to provide additional vaccines outside of COVID and flu so long as these are not cost-prohibitive. Grantees should count these vaccines in the grant reporting system, Cumulus. Cumulus includes the following other vaccines: Pneumococcal, Shingles, and Respiratory Syncytial Virus (RSV). All others can be documented under “other” vaccines. Counting these vaccines is helpful for telling a story of vaccine needs outside of COVID and flu in your community.

**Which COVID-19 vaccines are allowed under this grant?** Grantees can provide any COVID-19 vaccines approved by the U.S. Food and Drug Administration (FDA) and/or recommended by an individual’s healthcare provider. This includes but is not limited to Moderna, Pfizer, Johnson & Johnson, monovalent vaccines, and bivalent vaccines + boosters.

**Can uninsured and/or undocumented individuals receive vaccines?** The ADVC does not exclude or prevent anyone from receiving a vaccine, but ADVC funds cannot cover the cost of the vaccination itself. More detail is included in Allowable Expenses. Grantees can partner with providers that have the capacity to administer to uninsured individuals. HHS and the CDC are rolling out the Bridge Access program in September 2023 that will enable select pharmacies to cover the cost of COVID-19 vaccines for uninsured or underinsured individuals. There is more about the Bridge Access program here: [https://www.cdc.gov/vaccines/programs/bridge/index.html](https://www.cdc.gov/vaccines/programs/bridge/index.html)

**Can ADVC activities be provided outside of the immediate service area of our organization?** Yes, there are no limitations on where ADVC services are provided by grantees. Let your assigned grant manager know if you plan to expand your service area. More detail is included under Subgrantees & Partners.

**What are approved supportive services?** Supportive services include the following reportable activities in the grant reporting system, Cumulus.

- Help with scheduling COVID-19 and Influenza vaccination appointments for those who need it.
• Arranging or providing accessible transportation to COVID-19 and Influenza vaccination sites for those who need assistance.
• Providing or arranging personal support (e.g., peer support) for older adults and people with disabilities for those who need assistance.
• Providing necessary referral services in support of COVID-19 and influenza vaccines.

**Where can grantees access the latest information on vaccine guidance?**
Grantees can view the latest guidance on vaccines on the ADVC Resource Hub.

**Are monthly check-ins required?** All ADVC grantees are required to have a monthly check-in with their assigned grant manager, at minimum. Grantees can contact their grant manager with questions at any time. If you are unable to attend a monthly check-in, please alert your grant manager to reschedule or assign another attendee in your place.

**Are office hours required?** Grantees are not required to attend office hours. Office hours are held every Tuesday at 3 PM EST and Friday at 11 AM EST for grantees to discuss updates, best practices, innovations, and questions. Office hours sessions are recorded and meeting minutes are captured and sent to grantees via email weekly.

**How can grantees be added to the email distribution list or update their grant contacts?** The email of the individual who submitted your organization’s ADVC application receives ADVC emails by default. Organizational contacts are encouraged to forward emails to individuals who need ADVC information in your organization as much as possible. If a grant point-of-contact needs to be changed or added, contact your assigned grant manager.

**Grant Invoicing & Financial Reporting**

**When can grant awardees invoice USAging?** Sub-grantees can invoice USAGing and receive compensation in three payable periods:

• 50% upon receipt of the signed agreement
• 40% at approximately the halfway mark of the sub-grantee’s term of agreement, provided that the sub-grantee’s reporting is up to date, service delivery accomplishments reflect progress toward goals, and the sub-grantee has completed financial reporting showing at least 70% expenditure of the original 50% disbursement.
• Final 10% upon completion of the products listed in the associated Scope of Work (SOW) for the grant period, provided that all required grant reporting is
complete, and the sub-grantee has completed financial reporting showing the nature and amount of expenditures covering the entire grant period.

The invoice amounts for your organization are included in Attachment F of your subgrantee agreement. Grantees must use the code #5140-573 to invoice US Aging. If emailing invoices to US Aging, grantees must use invoice@n4a.anybill.com and copy your assigned grant manager. Additional invoice submission guidelines are included as an attachment to your grant agreement.

What are the financial reporting requirements for this grant? Financial reports are broken into the following three phases:

- The first Reporting Period covering grant activities through June 30, 2023, is due to US Aging by July 15, 2023;
- The second Reporting Period covering grant activities from July 1, 2023 – December 31, 2023, is due to US Aging by January 15, 2024; and
- The final Reporting Period covering grant activities from January 1, 2024 – April 15, 2024, is due to US Aging by May 15, 2024. The final report will be a compilation of the overall impact of each sub-grantee’s project and provide both empirical and anecdotal summaries.

US Aging will email a financial reporting template for your organization to use in advance of the reporting deadline. The template should be completed and emailed to your grant manager in a timely manner. Financial reports include all grant expenditures, including sub-grantee expenses, an account of the amount spent, and what budget categories they were spent in.

How can organizations adjust their budget? If budget adjustments are needed, grantees should contact their assigned grant manager. To request budget adjustments, grantees must prepare an updated budget spreadsheet and a budget narrative describing the need for budget changes including but not limited to the provision of more vaccines, increased scope of work, or increased geographic reach.

Are there penalties for not completing grant activities? Work plan progress will be discussed and documented in monthly check-ins with your grant manager. Funding is dependent on documented progress toward your agency’s goals set in the work plan and the effort made to complete activities. Additional documentation may be requested regarding expenditures or marketing collateral.

Grant Reporting System (Cumulus)

What are the programmatic reporting requirements for this grant? Grantees will be expected to regularly report data showing the number of community-based...
vaccine clinics held, the number of people who receive vaccinations, and the types of supportive services provided to assist with vaccine access, such as transportation to vaccine clinics and in-home vaccinations, as well as information on education and outreach. This information includes vaccinations delivered, number of clinics, age categories of recipients, type of vaccinations given, units and types of other supportive services provided, and zip codes of persons vaccinated. Reporting grant activities, as required by the grant agreement with USAGing, will take place in the grant reporting system, Cumulus. Grant activities are encouraged to be documented in Cumulus in real-time, but should be entered within 5-business days of the event. Recurring activities must be entered into Cumulus monthly, at minimum. Progress toward grant activities and targets will be discussed in your monthly check-ins with your assigned grant manager.

**How do organizations access Cumulus, set-up an account, and receive training on how to document in Cumulus?** Your organization will need to submit an organizational administrator name and email to USAGing to receive access to Cumulus. That organizational administrator can then add additional users to the system as needed. The email invite will include educational links to Cumulus training. These are available under "Docs" once you log into the system. They include a step-by-step guide on how to navigate and document activities in Cumulus. The ADVC orientation recording also includes a Cumulus overview. Additional Cumulus training can be requested from your grant manager.

**How do I report issues with my Cumulus account (i.e., password reset?)** You can contact Cumulus support at support@cumulus.care or by following the Support link in Cumulus here: https://cumulus.care/support It is helpful to include as much detail about the issue as possible such as the time, date, and description of the issue and also a screenshot of the problem or error you are experiencing, if applicable.

**Can multiple users from an organization be added to the grant reporting system, Cumulus?** Grantees will submit one person to serve as the administrator for the grant reporting system. Once the administrator is logged in, additional users can be added under that organization. All users added to the system can create, document, and report events in the system. Administrators are the only accounts that can add/remove users from a particular organization. There is more information on adding individuals to the system here: https://cumulus.care/docs/organization-member-management

**What information needs to be collected from vaccinated individuals?** The individual vaccine survey is available through the Cumulus platform. All vaccinated
individuals should complete the required questions (vaccines received and zip code) and should be encouraged to complete the entire survey. No identifiable information is being collected and survey data is being collected for grant reporting purposes only. Surveys can be collected either by using a QR code for the event or by manually entering information from paper surveys. Information from event surveys should be entered into Cumulus within five (5) business days from the event date.

**How are vaccine targets counted in Cumulus?** The number of vaccines your organization provides is counted under the following fields in Cumulus:

- “Final number of people receiving a first dose of COVID-19 vaccine”
- “Final number of people receiving a second (or later) dose of COVID-19 vaccine”
- “The final number of people receiving flu/influenza vaccines”
- “Final number of people receiving pneumococcal vaccinations”
- “Final number of people receiving shingles vaccinations”
- “Final number of people receiving Respiratory Syncytial Virus (RSV) vaccinations”
- “Final number of people receiving other vaccines”

Please note that only COVID and flu vaccines count toward your organization’s grant targets, however, USAging is tracking all vaccines provided in the grant reporting system. Please note that the number of Individual Vaccine Surveys documented in Cumulus do not automatically feed into vaccine totals or your organizational Dashboard. Vaccine totals **must** be entered manually in the fields described above following the completion of an event.

**Can we assist people with completing the individual vaccine surveys?** Yes, this is allowed. Interpretation and translation services are allowable expenses. The individual vaccine survey is available in 18 different languages. USAging’s National Partners may be able to assist with this work as well upon request. USAging recommends the use of laptops, tablets, and cell phones at vaccine events to encourage completion of the vaccine survey on-site.

**Can grantees collect vaccine survey data on paper?** Paper surveys of the vaccine survey can be printed and distributed at events; however, all paper surveys must be manually entered into the corresponding event in Cumulus for them to count. Paper surveys must be manually entered into the event by clicking, the “public link” and entering surveys individually. When you submit the survey, you can add another one at the end by clicking, “Submit Another Survey.” Surveys cannot be added if the event has ended, so be sure to adjust the end date and do not mark the event completed until all surveys have been entered.
Can organizations bulk import vaccine survey data into the grant reporting system, Cumulus? Yes, Cumulus has a CSV import function that can be requested from your assigned grant manager. Please note that this process is in place of utilizing the individual vaccine survey in Cumulus, and if paper surveys are used, organizations must manually enter the results into Cumulus.

Can organizations export vaccine survey data from Cumulus into other external systems? Yes, organizations can run an Individual Vaccine Survey Results report to receive a CSV download of vaccine survey responses to upload into other systems.

How do grantees document outreach? Grantees can count outreach and education encounters as the number of individuals reached through views and engagement of phone calls, social media posts, flyers, mailings, billboards, newspaper radio or TV ads, emails, etc. Grantees can create a monthly activity and bulk enter a number for these activities to reduce the administrative workload.

How do grantees document vaccines provided to individuals’ residences? These will be documented under “In-home vaccinations and individual services (non-public setting).” These can be entered as monthly activities to save time.

Can I mail vaccine surveys to third-party vaccine sites? Grantees should not count vaccines administered when providing supportive services to a third-party site, unless they are partnered with the third-party provider to host a clinic or event. If partnered with a third-party site, surveys can be completed by the individual over the phone and may receive an incentive for doing so.

Can grantees count training to providers and staff as vaccine outreach and education? Yes, if vaccine uptake information is being shared this can be documented in Cumulus under outreach and education as “Training for professionals, providers, and stakeholders.” The number of staff trained is the number of individuals reached, to be recorded in Cumulus.

Do dashboards and reports only populate if events are complete? No, any final numbers of vaccines and individuals reached via supportive services or outreach and education will automatically populate into the Cumulus dashboard and reports whether or not an event is in progress or complete. Grant targets will be reviewed in monthly check-ins with your assigned grant manager. Canceled or deleted event counts will not count toward grant targets. Ensure information is accurate when entering as Cumulus is used for reporting purposes. If you need to access a training area to practice entering then use the Cumulus Training Site.
Allowable Expenses

Can Aging and Disability Vaccination Collaborative (ADVC) funds be used to purchase vaccines? ADVC funds cannot be used to cover the cost of vaccines (including COVID-19 vaccines and boosters, Flu, Shingles, Pneumococcal, RSV, etc.) Most private insurances, Medicare, and Medicaid can cover the cost of vaccines but for those who may not fall under those categories, organizations or individuals can contact your local public health department or federally qualified health center. Grantees are encouraged to partner with entities that have the capacity to bill insurance for the cost of the vaccine.


Can ADVC funds be used to purchase vehicles? Renting or leasing vehicles, ridesharing costs, maintenance on the grantee’s current fleet of vehicles, or gas and mileage are acceptable expenses under this grant. The purchase of a vehicle is not allowed with ADVC grant funds.

Can the grant cover transportation like Uber to and from appointments? Rideshare expenses and any transportation assistance to and from vaccine clinics, community events, third-party vaccine sites, and other ADVC-related activities are allowable expenses under this grant. According to the federal reporting guidance, we are collecting transportation data per one-way trip under Supportive Services in the grant reporting system, Cumulus. This is based on the NAMRS/HCBS service unit reporting guidelines.

Can ADVC funds be used to purchase COVID-19 test kits? ADVC funds cannot be used to purchase COVID-19 test kits. Organizations are encouraged to utilize the national stockpile if interested in distributing COVID-19 test kits, masks, and other Personal Protective Equipment available at no cost. Your USAGING grant manager can provide more detailed information if agencies are interested in acquiring equipment from the national stockpile for distribution in their locality. This is also
true for accessible tests for people who are blind or who have low vision. These can be ordered by calling the Disability Information and Access Line at 888-677-1199. Assisting individuals with getting residential tests can be counted as a supportive service. More information is available here: https://acl.gov/covid-19/testing

**Can ADVC funds cover the cost of Paxlovid?** No, this should be covered by an individual’s insurance or a provider that serves uninsured individuals such as a public health office or Federally Qualified Health Center.

**Can ADVC funds be used to cover salaries and fringe of individuals hired or assigned to support grant activities?** Grant funds can cover salaries and fringe and should be documented in the budget worksheet.

**Is there an indirect cost maximum for this project?** Admin costs are limited to 10% unless the organization has a federally approved Nonprofit Indirect Cost Rate (NICRA) percentage. Admin and indirect costs should be documented in the budget worksheet.

**How can grantees set an admin rate for vaccine providers?** Administrative fees should be estimated based on local needs and reasonably set using your total ADVC budget. ADVC funds cannot cover the purchase of vaccines but can pay for things like staff time, supplies, travel, etc. The $33 per vaccine rate in the budget calculator of the ADVC application was included for estimating costs only based on the estimated amount to deliver outreach and education and can be increased, updated, changed, or reduced depending on your local needs. Grantees do not need to use this rate in calculating an administrative rate. Administrative rates do not need to be calculated on a per-vaccine basis.

**What are the parameters for incentives?** Incentives for ADVC should be reasonable and not exceed $50 per older adult or individual with disability, per vaccination event. Incentives may include gift cards but these should NOT be general gift cards such as a Visa. Food or gas incentive gift cards are allowed but should not exceed $50 per older adult or individual with a disability. Avoid gift cards that could allow for the purchase of unallowable items. Unallowable incentives include cash payments, exchange for cash, lotteries, and raffles for prize items such as electronics (i.e. TVs, iPad, speakers, or other luxury items), the purchase of alcohol, tobacco, or weapons. Allowable incentives should be documented by entering the number of individuals reached with incentives under Outreach & Education by checking the “Incentive” box under “Which types of activities were used to increase vaccine uptake?” in Cumulus. Employees of grantees are not eligible for incentives, even if they are not directly involved with the ADVC grant.
Are incentives reserved only for individuals that receive a COVID-19 or flu vaccine? USAging encourages organizations to consider only providing gift card or higher-priced incentives to individuals who receive a either a COVID-19 or flu vaccine; however, incentives are not restricted to a particular vaccine. Smaller “incentives” such as inexpensive give-aways (pens, hand sanitizer, magnets, etc.) can be provided to anyone at an outreach event.

Who is allowed to receive an incentive (gift card)? Incentives should be reserved for the targeted populations by this grant: older adults and people with disabilities. Incentives should not exceed $50 per individual. Any person receiving an incentive must complete a vaccination survey. Employees of grantees are not eligible for incentives.

Subgrantees & Partners
Can subgrantees attend ADVC training, office hours, and other events? Yes, subgrantees are invited and encouraged to attend any and all ADVC training including but not limited to webinars, office hours sessions, and other events.

Are formal agreements required with partners and subgrantees? USAging does expect that written agreements are put in place between the lead agency and partner organizations (i.e., a Memorandum of Understanding or contract), especially for organizations that are providing funding to or relying on a partner to fulfill grant responsibilities. Partner organizations are not required to submit financial reports to USAging. Lead agencies must track funding provided to partners within the grantee budget and financial reports to USAging. MOU templates and examples can be requested from your assigned grant manager. Primary grantees should ensure that any agency receiving funding as a subgrantee also meets federal requirements such as SAMS registration and a DUNS number.

What are examples of potential pharmacy partners that can secure vaccines and bill the cost of vaccines for grantees? Grantees are encouraged to partner with any type of pharmacy provider to secure vaccines for events and bill insurance for the cost of vaccines. Some providers that can fulfill these activities include community immunization providers, consulting pharmacists, employers, federally qualified health centers/rural health clinics, health systems, physician groups, long-term care providers, national or regional community pharmacy groups, occupational health providers, physician practices, public health departments, retail pharmacies, travel/mobile clinics, urgent care, etc.

Can subgrantees be added to the grant reporting system, Cumulus? Yes, subgrantees can be added to Cumulus, and assigned a separate grant reporting
administrator from the lead agency administrator. This can be requested from your grant manager by submitting each subgrantee’s organizational name, logo, address, primary organizational email, public organizational email, and administrative contact name, title, and email. Please include any grant targets you are requiring of the subgrantee so this can be uploaded into Cumulus including the estimated number of vaccines, supportive services, and outreach & education encounters.

**Can grantees partner with other ADVC grantees?** If there are agencies in the same area funded by the ADVC either through Option A with USAging or Option B with NCOA, we encourage agencies to strategize how to best cover the dual-grantee area. Your assigned grant manager can share which other grantees have been awarded in your state, and/or look up a potential partner to make sure they are not already funded. Grantees are encouraged to work with their grant manager to coordinate budgets and funding for grants. It is important that reporting for targets and funding are never duplicated. For grantees that share providers, we encourage separating coverage in some way (i.e. by population, service area/zip code, language, week/month, etc.) USAging and NCOA have slightly different Individual Vaccine Surveys, so it is encouraged to separate service delivery as much as possible when working with the same provider. USAging encourages grantees to have a clear MOU or agreement in place with providers to guide reporting and budgets. Individuals should not receive multiple incentives from various grantees for the same shot.

**How will we report vaccines when we partner with another USAging or NCOA grantee for an event?** Grantees are allowed to partner together for an event, but participating organizations should ensure there is no duplication of vaccine counts, supportive services, or education and outreach within Cumulus. NCOA grantees also use Cumulus but have a different survey for participants to complete; this should be considered when two grantees are working together. USAging encourages grantees to offer events in areas that don’t have coverage and allow other grantees (USAging and NCOA) to cover other areas, maximizing vaccine counts.

**How can grantees navigate funding supplemented by other projects outside of ADVC?** State funding, AUCD projects, and HRSA funding sources are all available and allowed. USAging asks that you do not fund organizations that are also funded by the ADVC grant. Please reduce duplication of effort and do not duplicate financial resources. USAging understands that the number of individuals reached may be inherently duplicative (such as individuals who receive a flyer at different events.)
Promotional Materials

Are grantees allowed to use the ADVC logo for promotional and printed materials? Grantees are allowed access and use of the ADVC logo. Please review and adhere to the ADVC Style Guide to ensure the logo is used appropriately and is presented as it was intended. Access to the logos and style guide is available on the ADVC Resource Hub.

Do grantees need to use a funding acknowledgment? Yes, you must use the following language when issuing statements, press releases, and other supported publications and forums describing projects or programs funded in whole with ACL funding.

“This [project/publication/program/website, etc.] [is/was] supported by the Administration for Community Living (ACL, U.S. Department of Health and Human Services (HHS) through USAging as part of a financial assistance award to USAging totaling $74,999,835 with 100 percent funding by ACL/HHS. The contents are those of the author(s) and do not necessarily represent the official view of, nor an endorsement, by USAging, ACL/HHS, or the U.S. Government.”

Guidance on using the funding acknowledgment is available on the ADVC resource hub here:

Will the media toolkit be available to grantees free of charge? Yes, all materials will be posted to the ADVC resource page for grantees to utilize free of charge. For running local ads in your service area, you may need to contact a local sales representative to purchase ad space, paid for utilizing the ADVC grant budget, which can be discussed in more detail with your assigned grant manager.

Will we be able to add our regional or state cultural flair to the USAging media toolkit templates and messaging? Local information can be added, and templates can be customized for local markets, but we encourage grantees to keep the national messaging for a unified campaign and consistency without duplicating efforts. TV and Radio PSAs will also have blank space for grantees to add more detail and graphics.

Who do we contact if we have an issue accessing, downloading, receiving, or editing the media toolkit? Contact your assigned grant manager for assistance.
Can grantees cobrand the USAging photo release form? Grantees can use their own photo release form or adapt the USAging one on the resource hub to use if they do not have one.

Are there tips on taking pictures at events? Yes, tips on capturing photo and video at events are available here: https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fwww.usaging.org%2F%2FFiles%2FTips%2520for%2520Capturing%2520ADVC%2520Event%2520Photos%2520and%2520Videos.docx&wdOrigin=BROWSELINK

How can grantees share stories with USAging without pictures? You can send a blurb, narrative, or overview of the event to your grant manager via email or in Cumulus in the comments of the event.

Can grantees use their own materials instead of the templates included in the toolkit? Yes, grantees can use their own materials. If public-facing, please follow instructions for including the funding acknowledgment and ADVC logo where applicable. Grantee-created materials do not need to be approved, but your grant manager is available if you have any questions or would like additional levels of review.

Are materials included in the toolkit accessible? All ADVC materials are created under ADA 508 compliance. The level of accessibility depends on the materials type, for example, materials intended for digital release will be structured in a way to accommodate screen readers.

Are materials able to be translated? All materials provided by USAging will be translated into Spanish. Other languages can be made available by request via USAging’s National Partners. Please note that materials translation can take up to three weeks.